## **BEST AVAILABLE COPY**

PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003  Application of Education										- 1		
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE OR SMALL ENTITY												
TOTAL CLAIMS							٠,	RATE	FEE	]	RATE	FEE .
FOR NUMBER FILED NUMBER EXTRA							BASIC F	EE 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS / minus 20= * 6								X\$ 9=	=	OR	 X\$18=	
INDEPENDENT CLAIMS 3 minus 3 = * Ø								X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290≐	
* 10	the difference	in column 1 is	less than ze	ero;-enter	-0 in c	oluma 2		TOTAL	7000	OR	TOTAL	
	C		. (52,526		OTHER							
4	1505	(Column 1)		(Colun	nn 2)	(Column 3)		SMAL	L ENTITY	OR	SMALL	
A		CLAIMS : REMAINING		HIGH		PRESENT	1	RATE	ADDI- TIONAL	<u> </u>	RATE	ADDI- TIONAL
Ž.		AFTER AMENDMENT		PREVIC		EXTRA		üVic	FEE			FEE:
MQ	Total	. 18	Minus	·· 2	0.	=		X\$ 9=		OR	X\$18=	, .
AMENDMENT	Independent	. 5	Minus	***	3	ين 2		X43=		OR	X86=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							£+145=		OR	1290=	
in the control of the									ı.	OR	TOTAL ADDIT, FEE	
	•	(Column 1)		(Colum	nn 2) /	(Column 3)		ADDIT. FE	.E L			
<u>.</u>	· ·	CLAIMS		HIGH	EST ·		1	<u>-</u>	ADDI-	١.	<u> </u>	ADDI-
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	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM .		ا ل	-145=		OR	+290=	
	· · · · · · · · · · · · · · · · · · ·		-	- :2	- 200		. 1	TOTA			TOTAL	-
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(Column 3) (Column 3) ADDI												
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MEN	Independent • Minus ••• =							X43=	· .	OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145=											+290=	
• [	If the entry in column 1 is less than the entry in column 2, write 10 in column 3.								<u> </u>	OR OB	TOTAL	
•• I	I the 'Highest Nur	nber Previously Pa	id For IN THI	S SPACE is S SPACE is	i less (har i less (har	30, enler 20 3. enler 3.		TOTA ADDIT. FE	e L		ADDIT FEE	L
The "Highest Number Previously Paid For" IN THIS SPACE is less than 3. enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1												

PATENT ATTY. DOCKET NO. VSTI/10U

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**Applicant** 

Rodger P. Grantham

Art Unit: 3751

Serial No.

: 10/820,317

Examiner: Timoth Lewis Moust

Filed

April 8, 2004

For

CONTROL OF A/L RATIOS IN VACUUM ASSIST VAPOR RECOVERY

**DISPENSERS** 

Mail Stop AMENDMENT Commissioner of Patents

Via Facsimile

P.O. Box 1450

Alexandria, VA 22313-1450

## AMENDMENT TRANSMITTAL

1. X Transmitted herewith is a Response to Office Action.

Small Entity status of this application under 37 CFR 1.9 and 1.27 has been established by

a verified statement previously submitted.

Enclosed is a verified statement to establish Small Entity status

X

Other than a Small Entity

2	Thefe	a bea bea			own below.
3.	ine ie	e nas bec	n caiculai	ed as st	nown below.

(Col. 1) Claims Remaining After Amendment		(Col. 2) Highest No. Previously Pald For		(Col. 3)	SMALL ENTITY		LARGE ENTITY	
				Extra	Present Rate	Fee	Present Rate	Fee
TOTAL	18	MINUS	20	0	x \$25	\$0	x \$50	\$0
INDEP.	5	MINUS	3	2	x \$100	\$0	x \$200	\$400
first pr	ESENTATIO	N OF MUL	TIPLE DEP.	+\$180	\$0	+\$360	50	
		TOTALS		TOTAL	50	TOTAL FEE	\$400	

X Additional fee for claims is required.

I hereby certify that this correspondence is being sent via facsimile (703-872-9306) to Examiner Timothy Lewis Moust in Art Unit 3751 at Mail Stop: Amendment, U.S. Patent Office, P.O. Box 1450. Alexandria, VA 22313-1450: April

15, 2005

Steven W. Benintendi, Ph.D.

Reg. No. 56,297

31/19/2025 STRELIAS | 32000803 237000

PAGE 2/22 \* RCVD AT 4/15/2005 2:44:42 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-1/0 \* DIVIS:8729306 \* CSID:513 241 6234 \* DURATION (mm-ss):05-16

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4X_	Please charge my Deposit Account No. 23-3000 in the amount of \$400.00.							
5.	The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.							
(a)_X_	Complete (a) or (b) as applicable.  Applicant petitions for an extension of time under 37 CFR 1.136 for the total numerator checked below:							
	Extension (months)  X one month two months three months four months five months Extension fee due wi	Fee for other than small entity \$ 120.00 \$ 450.00 \$1020.00 \$1590.00 \$2160.00 ith this request \$ 120.00	Fee for small entity \$ 60.00 \$225.00 \$510.00 \$795.00 \$1080.00					
If an additiona complete the n	l extension of time is required, ext item, if applicable)	please consider this a	petition therefor. (Check and					
_	An extension for months has already been secured and the fee paid thereof of \$ is deducted from the total fee due for the total months of extension now requested. Extension fee due with this request \$							
<u>x</u>	Please charge my Deposit Account No. 23-3000 in the amount of \$ 120.00.  OR							
(b)	Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.							
6. <u>X</u>	If any additional fee for claims or extension of time is required, charge Account No. 23-3000.							
		Ster	rectfully submitted.  Bearing Landi ven W. Benintendi, Ph.D. 3. No. 56,297					

Wood, Herron & Evans, L.L.P. 2700 Carew Tower 441 Vine Street Cincinnati, OH 45202-2917 Voice: (513) 241-2324 Facsimile: (513) 241-6234